

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Proposing rule making related to care of young persons with complex medical conditions and providing an opportunity for public comment

The Human Services Department hereby proposes to amend Chapter 81, “Nursing Facilities,” and Chapter 82, “Intermediate Care Facilities for Persons with an Intellectual Disability,” Iowa Administrative Code.

Legal Authority for Rule Making

This rule making is proposed under the authority provided in Iowa Code section 249A.4.

State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code section 249A.4.

Purpose and Summary

Currently, Iowa does not have an appropriate system of care for young adults with complex medical conditions. This has resulted in inappropriate nursing home placements and could force Medicaid members to seek services outside the state of Iowa. Current rules are limited to residents who are 21 years of age and under. These proposed amendments will expand the special population nursing facility criteria to include persons residing in an intermediate care facility for persons with medical complexity up to age 30. The amendments will increase the number of qualified providers available to meet the needs of young adults with complex medical conditions.

Fiscal Impact

This rule making has a fiscal impact to the State of Iowa. This rule making has a fiscal impact of \$100,000 annually or \$500,000 over five years. The fiscal impact statement for specific assumptions and description of how estimates were derived may be obtained by contacting the Department.

Jobs Impact

After analysis and review of this rule making, no impact on jobs has been found.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Department for a waiver of the discretionary provisions, if any, pursuant to rule 441—1.8(17A,217).

Public Comment

Any interested person may submit written comments concerning this proposed rule making. Written comments in response to this rule making must be received by the Department no later than 4:30 p.m. on August 21, 2018. Comments should be directed to:

Harry Rossander
Bureau of Policy Coordination
Department of Human Services
Hoover State Office Building, Fifth Floor
1305 East Walnut Street
Des Moines, Iowa 50319-0114
Email: policyanalysis@dhs.state.ia.us

Public Hearing

No public hearing is scheduled at this time. As provided in Iowa Code section 17A.4(1)“b,” an oral presentation regarding this rule making may be demanded by 25 interested persons, a governmental subdivision, the Administrative Rules Review Committee, an agency, or an association having 25 or more members.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its [regular monthly meeting](#) or at a special meeting. The Committee’s meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

The following rule-making actions are proposed:

ITEM 1. Amend rule **441—81.1(249A)**, definition of “Special population nursing facility,” as follows:

“*Special population nursing facility*” refers to a nursing facility that serves the following populations:

1. One hundred percent of the residents served are aged ~~21~~ 30 and under and require the skilled level of care.
2. Seventy percent of the residents served require the skilled level of care for neurological disorders.
3. One hundred percent of the residents require care from a facility licensed by the department of inspections and appeals as an intermediate care facility for persons with mental illness.
4. One hundred percent of the residents require care from a facility licensed by the department of inspections and appeals as an intermediate care facility for persons with medical complexity.

ITEM 2. Adopt the following **new** definition of “Intermediate care facility for persons with medical complexity” in rule **441—82.1(249A)**:

“*Intermediate care facility for persons with medical complexity*” means an intermediate care facility for persons with an intellectual disability which provides health and rehabilitation services to individuals who require a skilled nursing level of care, have either a multiple organ dysfunction or severe single organ dysfunction, and require daily use of medical resources or technology.